

APPLICANT(S): SHACHOR, Gal  
SERIAL NO.: 10/697,183  
FILED: October 30, 2003  
Page 8

## **REMARKS**

Applicant asserts that the present invention is new, non-obvious and useful. Favorable reconsideration and allowance of the application are respectfully requested in view of the foregoing amendments and following remarks.

### **Status of Claims**

Claims 1–11, 13–15, 17–23, 25 and 33 are pending in the application. Claims 1–8, 13–14, 22, 25 and 33 have been amended herein. Claims 12, 27, and 34 have been cancelled herein without prejudice or disclaimer. Claims 16, 24, 26 and 28–32 were cancelled by previous amendment. No new matter has been added.

### **The Telephone Interview**

Applicant wishes to thank the Examiner, Ms. Yaima Campos, and the Supervisory Primary Examiner, Mr. Sanjiv Shah, for granting and attending the telephone interview on May 24, 2007 with Applicant's representatives. In the interview, claim 1 was discussed, as were the references of Cooke, Jr. et al. (U.S. Patent No. 6,574,629) and 'Supplement 10' ("Digital Imaging and Communications in Medicine" Supplement 10, Basic Worklist Management, 1996). The independent claims have been voluntarily amended herein to clarify the claimed subject matter in light of this discussion.

## **CLAIM REJECTIONS**

### **35 U.S.C. § 103 Rejections**

In the Office Action, the Examiner rejected claims 1–7, 11–15, 17–19, 21–23, 25, 27 and 33–34 under 35 U.S.C. §103(a) as being unpatentable over U.S. Patent No. 6,574,629 to Cooke, Jr. et al. (hereinafter "Cooke") in view of "Digital Imaging and Communications in Medicine" Supplement 10, Basic Worklist Management, 1996 (hereinafter "Supplement 10").

In addition, the Examiner rejected claims 8–10 under 35 U.S.C. §103(a) as being unpatentable over Cooke in view of Supplement 10 and further in view of U.S. Patent No. 6,910,106 to Sechrest et al. (hereinafter "Sechrest"). The Examiner also rejected claim 20

APPLICANT(S): SHACHOR, Gal  
SERIAL NO.: 10/697,183  
FILED: October 30, 2003  
Page 9

under 35 U.S.C. §103(a) as being unpatentable over Cooke in view of Supplement 10 and further in view of Bocionek, U.S. Publication No. 2002/0091765 (hereinafter “Bocionek”).

Applicant respectfully asserts that independent claims 1, 13, 21, 25 and 33, as currently amended, include features that are not taught or suggested by the references of Cooke and Supplement 10, taken individually or in combination, including combination with the references of Sechrest and Bocionek.

Specifically, as discussed in detail below, none of the cited references, taken individually or in combination, teach or suggest at least “obtaining information from a Digital Image Communications in Medicine (DICOM) modality worklist regarding at least one task scheduled to be performed by at least one modality”, “determining, based on said information and at least one predetermined rule, at least one type of data likely to be accessed in connection with said at least one task” and/or “prefetching at least some data of said type from the slower access part to the faster access part of said storage,” as recited in amended independent claims 1, 13, 21, 25 and 33.

Applicant agrees with the Examiner’s statement in the Office Action that Cooke does not expressly disclose the details of examining a Digital Image Communications in Medicine (DICOM) modality worklist. Specifically, Applicant asserts that the system of Cooke utilizes a PACS broker to obtain information *directly from a RIS, using HL7 communication*, and therefore does not teach at least the claimed feature of “obtaining information *from a Digital Image Communications in Medicine (DICOM) modality worklist.*”

For example, under the section headers “PACS Broker” and “Prefetching,” Cooke describes a system that clearly does not require, suggest, or imply obtaining information from a DICOM modality worklist. This can be clearly ascertained from the following portions of Cooke:

“PACS broker 46, also referred to herein as the RIS gateway, provides an orderly, unified view of RIS 44 to the PACS core components. [...] To this end, PACS broker 46 is able to communicate in HL-7 (“Health Level 7”) with the RIS, and to communicate in DICOM with network gateway 6. [...] A PACS broker, or its equivalent, is therefore generally used if image/study routing is to be performed by the network gateway based on referring physician or patient location.” (Cooke, column 12 line 66 – column 13 line 15)

“In more detail, pre-fetching involves RIS gateway 46 receiving information concerning a scheduled event from RIS 44, and then transmitting that information to the PACS, in particular to network gateway 6 (see FIG. 1). The network gateway then queries the RIS, via the RIS gateway, requesting details concerning the scheduled event.” (Cooke, column 18 lines 59–65)

In addition, Applicant respectfully submits that since Cooke does not teach obtaining information from a DICOM modality worklist, Cooke cannot teach the claimed features of “determining, *based on said information* and at least one predetermined rule, at least one type of data likely to be accessed” and/or “prefetching at least some data *of said type*”.

Furthermore, it is respectfully submitted that Cooke teaches away from prefetching based on information obtained from a DICOM modality worklist, as required by Applicant’s independent claims. Although the system of Cooke utilizes the DICOM standard for various tasks (see, for example, Figures 1 and 4 of Cooke), Cooke expressly chooses not to use a DICOM modality worklist for obtaining “information regarding at least one task scheduled to be performed by at least one modality,” and rather utilizes a PACS broker to facilitate the communication of information from the RIS, thereby teaching away from Applicant’s invention.

With regard to Supplement 10, Applicant respectfully asserts that this reference also does not teach or suggest prefetching based on information obtained from a DICOM modality worklist, and thus does not cure the deficiencies of Cooke.

Specifically, Supplement 10 does not teach or suggest Applicant’s claimed features of “obtaining information from a Digital Image Communications in Medicine (DICOM) modality worklist”, utilizing that information for “determining, based on said information and at least one predetermined rule, at least one type of data likely to be accessed”, and “prefetching at least some data of said type”.

For example, as stated in the “Scope and Field of Application” section of Supplement 10, the Basic Worklist Management class is directed only to the communication of modality worklists between application entities, as follows:

“This Supplement to the DICOM Standard specifies the Basic Worklist Management Service Class, which supports the exchange of any type of worklist from one AE to another

APPLICANT(S): SHACHOR, Gal  
SERIAL NO.: 10/697,183  
FILED: October 30, 2003  
Page 11

AE. [...] The Basic Worklist Management Service Class is used as a mechanism to pass the worklist from the IS to the AE associated with the application where the task is to be performed.” (Supplement 10, page iv, lines 44–45 and page v, lines 20–21)

Although the DICOM modality worklist is described in Supplement 10 as being *queryable* by an Application Entity (“The worklist has to be queried by the Application Entity associated with the application on which, or by which, the tasks included in the worklist have to be performed.” Supplement 10, page v, lines 14–15), Supplement 10 clearly does not describe actual querying for the specific purpose of prefetching. To the contrary, Supplement 10 describes a limited scope of application for the DICOM modality worklist, as follows:

“The Modality Worklist SOP Class *is not intended to provide access to all IS information and services which may be of interest* to a Modality operator or attending physician. Its primary focus is the efficient operation of the image acquisition equipment.” (Supplement 10, page v, lines 44–45; *emphasis added*)

Thus, it is respectfully submitted that it would not have been obvious for a person of ordinary skill in the art to combine the teachings of Supplement 10, which apply strictly to worklist management and communication, with those of Cooke, which relate to prefetching through a broker/gateway and teach away from obtaining information from a DICOM modality worklist.

Accordingly, neither Cooke nor Supplement 10, taken individually or in combination, teach or suggest the claimed features of “obtaining *from a Digital Image Communications in Medicine (DICOM) modality worklist* information regarding at least one task scheduled to be performed by at least one modality”, “determining, *based on said information* and at least one predetermined rule, at least one type of data likely to be accessed”, and “prefetching at least some data of said type,” as recited in amended independent claims 1, 13, 21, 25 and 33.

In view of the above, Applicant respectfully requests reconsideration and withdrawal of the rejection under 35 U.S.C. §103 of the amended independent claims 1, 13, 21, 25 and 33 and of claims 2–11, 14–15, 17–20 and 22–23 dependent thereon.

APPLICANT(S): SHACHOR, Gal  
SERIAL NO.: 10/697,183  
FILED: October 30, 2003  
Page 12

### **Conclusion**

In view of the foregoing amendments and remarks, Applicant submits that the pending claims distinguish over the prior art of record and are in condition for allowance. Favorable consideration and passage to issue are therefore respectfully requested.

The Examiner is invited to telephone the undersigned counsel to discuss any further issues yet to be resolved in connection with this application.

Please charge any fees associated with this response to Deposit Account 09-0468.

Respectfully submitted,

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